POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mij		1/4/9?
O.I.P.E. CLASSIFIER		48	1/13/00
FORMALITY REVIEW		CxHT	1-31-02
RESPONSE FORMALITY REVIEW		CxHT	4-1-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

Claim	Date								Claim	Date									Claim	Date							
Final / Original	4-7-0?	8/7/03	03/26/04						Final / Original										Final / Original								
1	✔	✔	✔						51										101								
2	✔								52										102								
3	✔								53										103								
4	✔								54										104								
5	✔								55										105								
6	✔								56										106								
7	✔								57										107								
8	✔								58										108								
9	✔								59										109								
10	✔								60										110								
11	✔								61										111								
12	✔								62										112								
13	✔								63										113								
14	✔								64										114								
15	✔	✔							65										115								
16	✔								66										116								
17	✔	✔							67										117								
18	O	O							68										118								
19	✔	✔							69										119								
20	✔								70										120								
21	✔								71										121								
22	✔								72										122								
23	✔								73										123								
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25	✔								75										125								
26	✔								76										126								
27	✔								77										127								
28	✔								78										128								
29	O	O							79										129								
30	✔	✔							80										130								
31	✔								81										131								
32	✔								82										132								
33	✔								83										133								
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50									100										150								

If more than 150 claims or 10 actions
staple additional sheet her

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